

CANNON BUILDING 861 SILVER LAKE BLVD., SUITE 203 DOVER, DELAWARE 19904-2467

BOARD OF HOME INSPECTORS

TELEPHONE: (302) 744-4500 FAX: (302) 739-2711 WEBSITE: <u>DPR.DELAWARE.GOV</u> EMAIL: <u>customerservice.dpr@state.de.us</u>

APPLICATION FOR HOME INSPECTOR TRAINEE REGISTRATION

	INSTRUCTIONS				
w	/hen to Apply				
ar as	efore applying for Delaware licensure as a Home Inspector by <u>examination</u> , you must first register as a Home Inspector Trainee and complete the required inspections. Apply for registration as a Home Inspector Trainee only if you do <i>not</i> hold a <i>current</i> license a Home Inspector in another jurisdiction (state, U.S. territory or District of Columbia). If you hold a current Home Inspector license another jurisdiction, apply by <u>endorsement</u> .				
R	equirements				
	Submit a completed, signed and notarized <u>Application for Home Inspector Trainee</u> .				
	☐ Enclose the non-refundable processing fee by check or money order made payable to "State of Delaware."				
	 Arrange for the Board office to receive a <i>Verification of Home Inspector Trainee Supervision</i> form (included with this application) completed and signed by your supervising Delaware-licensed Home Inspector(s). The supervisor must send the form <i>directly</i> to the Board office. If you have more than one supervisor, <i>each</i> supervisor must submit a completed and signed form. 				
	If you have never been issued a U.S. Social Security Number (SSN), submit a <u>Request for Exemption from Social Security Number Requirement</u> . The Privacy Act of 1974, Section 7, requires the following information to be given to all applicants: Applicants for any Delaware professional or occupational license, permit, registration or certificate (other than Gaming permits) are required to provide a U.S. SSN (29 Del. C. §8735(m)). The Division of Professional Regulation uses the SSN primarily to verify identity and safeguard personal information. It may also be used to enforce child support obligation (13 Del. C. §2216) and for other lawful purposes.				
When the application is considered complete, the Board will review it at its next <u>meeting</u> . If approved, the Board office will iss registration. Completing Required Inspections					
				re	t least 75 supervised home inspections are required for Delaware Home Inspector licensure. You may start accumulating the equired inspections after your trainee registration is issued. You and your supervising Home Inspector(s) must maintain ecords of your inspections on the Experience Log. The Log will be required when you apply for Home Inspector licensure by xamination.
IDI	ENTIFYING AND CONTACT INFORMATION				
1	Nama:				
١.	Name:				
2.	Other Names Used: None (Include maiden, other married, alternative spellings.)				
3.	Date of Birth (month/day/year): Gender:				
4.	4. Have you been issued a U.S. Social Security Number? Yes No If yes, enter your SSN: If no, you must file a Request for Exemption from Social Security Number Requirement.				
5.	Residence Address:				
	City State Zip code				
6.	Residence Phone: Residence Email: None				

SUPERVISOR INFORMATION

7.	Supervisor Name: _	If you have more than one, enter your main supervisor.	Delaware License: H4-	See Instruction Sheet
8.	Business Name:			
9.	Business Address:			
		City	State	Zip code
10.	Business Phone:	Business Email:		
11.		supervisors? Yes \(\subseteq \text{No } \subseteq \text{If yes, enclose a se} \) Home Inspector license number.	parate sheet listing each	supervisor and
		office to receive a <i>Verification of Home Inspec</i> I by each supervising Home Inspector.	ctor Trainee Supervision	form (listed below)
LIC	ENSURE HISTORY	•		
12.		n a registered home inspector trainee or held a Hoes, list each jurisdiction:	ome Inspector license in ar	y jurisdiction?
		JURISDICTION	LICENSE NUMBER	ł .
		pard office to receive a letter of good standing trainee or held a license or certification.	directly from each jurisd	iction where you
DIS	CLOSURES			
13.	misdemeanor or oth jurisdiction? Yes [record from any jurisdiction]	n convicted of or entered a plea of guilty or <i>nolo co</i> ner criminal offense, including any offense for whice No I f yes, submit a complete explanation in which you have been convicted chistory record, see State Bureau of Identificat	ch you have received a par on and a certified copy of or pardoned. For informa	don, in any your criminal history
14.	Are any criminal characteristics your criminal history	arges pending against you in any jurisdiction? Ye	es 🗌 No 🔲 If yes, submi	t a certified copy of
15.	including but not lim for nonpayment of I contain conditions p surrender of a licen	vived any administrative penalties (disciplines) regnited to fines, formal reprimands, license suspensificense renewal fees), probationary limitations, or blaced by a regulatory agency on your professionase, certificate or registration in Delaware or elsew copy of the agency's order.	ions or revocation (except the have you entered into any all conduct and practice, inc	or license revocations agreements which luding any voluntary
16.		proceedings or unresolved complaints pending a reviously, licensed, certified, or registered? Yes [
17.		pairment related to drugs or alcohol that would linwith the safety of the public? Yes \square No \square If yes		
18.	Do you certify that y	ou will carry your registration card while performing	ng supervised home inspe	ctions? Yes 🗌 No 🗌

To ensure consideration of your license application at the next Board meeting, the Board office must receive all of these items no later than 4:30 PM ten full working days before the meeting date:

- Completed, signed and notarized application form
- Fee payment
- All required supporting documentation.

Applications that are not complete within 12 months of filing may be considered abandoned and discarded. When your application is complete, please allow 4-6 weeks to receive your license.

AFFIDAVIT

I, the applicant, being duly sworn according to law, depose and say that the answers above set forth are true to the best of my knowledge and belief and that the application is made for the purpose of inducing the issuance of the license requested. I hereby confirm that I have read and agree to abide by all home inspector laws and rules in the State of Delaware and agree to cooperate with any investigation initiated by the Delaware Board of Home Inspectors including providing relevant documents and personally appearing before the Board and/or its investigators.

Applicant Signature:		Date:	
State of	County of _		
Sworn and subscri	bed to before me this	day of	, 2
CE AI	Signature of Notary Public	ic:	
SEAL	My commission expires: _		

APPLICATIONS THAT ARE UNSIGNED, NOT NOTARIZED, INCOMPLETE OR SUBMITTED WITHOUT THE REQUIRED PROCESSING FEE WILL BE REJECTED.



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VERIFICATION OF HOME INSPECTOR TRAINEE SUPERVISION

INSTRUCTIONS: Each of a Trainee applicant's supervising home inspector(s) completes and signs this form Trainee Applicant's Name: First Middle Initial Supervisor's Name: _____ First Middle Initial Do you hold a Delaware Home Inspector license? Yes \sum No \subseteq If no, STOP. You cannot supervise a trainee. If yes, 3. enter DE License: H4-Business Address: City State Zip code _____ Email: _____ 5. Phone: I certify that the applicant named above will assist in completing home inspection reports and may co-sign the home inspection under my supervision. Yes \Boxed No \Boxed 7. Do you certify that you will: actively and personally supervise the trainee? Yes \(\square\$ No \(\square\$ review and sign the home inspection report? Yes \(\square\) No \(\square\) accept total responsibility for the home inspection report? Yes \subseteq No \subseteq review and approve the trainee's Experience Log and provide copies of any home inspection reports the trainee assisted in preparing as requested by the Board? Yes \(\square\) No \(\square\) comply with all rules and policies for supervisory home inspectors? Yes \subseteq No \subseteq only assign work to the trainee if the trainee is competent to perform such work? Yes \square No \square not charge the trainee any fee or other item of value as a condition of supervision? Yes \(\subseteq \text{No} \subseteq \) not require a trainee to execute a non-compete contract as a condition of supervision? Yes \square No \square Do you supervise anyone other than the NAME OF TRAINEE/LICENSEE LICENSE NUMBER JURISDICTION trainee named above? Yes
No If yes, enter the information at right. 9. Do you agree to notify the Board in writing when you are no longer supervising the trainee? Yes \square No \square Supervisor Signature: _____ Date: _____ _____ County of _____ State of _____ day of ______, 2_____, Sworn and subscribed to before me this

Return the signed, completed, notarized form directly to the Board office at the address above.

My commission expires:

Signature of Notary Public:

SEAL



DELAWARE BOARD OF HOME INSPECTORS EXPERIENCE LOG

Instructions

- You must submit an Experience Log to the Board when you are applying for licensure by Examination.
- You must maintain an *Experience Log* while you are a registered Home Inspector Trainee. You will be required to submit the completed *Log* to the Board when you apply for Home Inspector licensure by examination.
- The Board office must receive a Verification of Home Inspector Supervision form, which is included in the Home Inspector Trainee application form, for each supervisor who appears on your Experience Log.
- Use the following guidelines to complete your Experience Log.
 - 1. Enter your name and, if you are Trainee, your Trainee registration number, at the top of each page of the Log.
 - 2. You may copy the Log. Number the Log pages in the space provided in the upper right corner.
 - 3. List the client name and property address. *Include the city, state and zip code*.
 - 4. Enter date of inspection in month/day/year format.
 - 5. Print the name of the licensed home inspector who supervised the inspection.
 - 6. Enter the license number of the licensed home inspector that supervised the inspection.
 - 7. The supervising home inspector must sign the log in the space provided.
 - 8. Sign and date the bottom of each page of the Log.

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DELAWARE BOARD OF HOME INSPECTORS EXPERIENCE LOG

			Name of Supervisor	Supervisor Delaware License Number	Signature of Supervisor
				H4	
affirm and sake availab	state that this <i>Experience Log</i> is true and correple for examination copies of home inspection re	ect and that the ace	tivities listed are truthfully rep ared by me for which I claim e	resented in this log. Upon page 12 per length 12 per lengt	request of the Board, I v